teeth, accessory sinuses, etc. It is possible by these means to reduce the danger of local recurrences and when recurrences do occur they are usually late and assume a more chronic type of lesion. If extirpation is not to be complete the authors believe it should not be attempted. They have seen hopeless dissemination follow excision for diagnosis and believe that such test excisions should be made only exceptionally. The authors have found the use of an immune serum is distinct value although they cannot offer proof that the diphtheroid bacillus described by them is the actual cause of the disease. Patients who tolerate the serum seem to improve more rapidly and to receive more permanent benefit than those not receiving serum treatment. Arsenic is without specific and lasting value in any form yet available from Fowler's solution to salvarsan. Fresh air, sunshine and proper feeding are infinitely superior to any drugs when there is indication for tonics. With regard to results the authors conservatively decline to give exact figures but they believe that as their experience increases and methods of treatment improve greater benefits are being obtained. They are of the opinion that in about 20 per cent. of all cases recovery is a possibility. By recovery is meant freedom of signs and symptoms of the disease for a period of five years. Earlier diagnosis and the recognition that Hodgkin's disease, if treated promptly and radically, is curable would raise this percentage materially.

The Treatment of Hodgkin's Disease.—Holding and Brown (*Journ. Am. Med. Assn.*, 1917, lxviii, 701) report 18 cases of Hodgkin's disease in which the diagnosis was established by microscopic examination. These cases were all fully developed with lesions generalized throughout the body. The claims of a specific diphtheroid organism have not been proved, in fact, have been disproved by Lorrey, yet their study seems to point to an infectious origin of the disease. The treatment of Hodgkin's disease is extremely unsatisfactory both in results obtained and methods employed. Perhaps this is to be expected in a disease, the cause of which is unknown, and which on microscopic examination of involved tissues in its early stages is extremely difficult to differentiate from lymphosarcoma, lymphoma, thymoma, and the other adenopathies of lymphoid origin. No specific or constitutional method of treatment has been established. The modern methods advised are essentially the same as those employed for malignant tumors, complete excision and diagnosis by microscopic section in the earliest stages while the lesion is restricted to a single locus followed by prophylactic roentgen treatment, together with the searching out and the elimination of all possible foci of infection. The authors feel that particular emphasis should be laid on the necessity of extensive general roentgen treatment in all of these cases immediately after the diagnosis is established. The surgical removal is only local in its action, and constitutes more or less of a shock and drain on the patients' vital resources. The roentgen rays should be given over all lymphatic structures of the body, including the mediastinal and abdominal lymph nodes, thus giving us a general action which in proper dosages they have invariably found to improve the patient's general physical condition instead of weakening him as the extensive surgical operations did in the fully developed stages of the disease.

It was noticeable that better results were obtained when treatment was instituted in the early stages of the disease, when lesions were confined to one side of the neck. It is quite probable that if patients in whom the lesion was confined to the tonsil or to a few glands of the neck presented themselves for treatment, they might be cured by complete tonsillectomy and excision followed by postoperative roentgen treatment; certainly these methods should be given a thorough trial in cases in the incipient stages of the disease. The authors are of the opinion that radium will produce fully as good results as the roentgen rays in Hodgkin's disease. The results obtained by various methods of treatment over a period of three years' observation are summarized. The authors note that of the thousands of patients treated there are only two authentic cases in which the patients are reported symptom-free after five years.

The Diagnosis and Serum Treatment of Anterior Poliomyelitis.—Zinghen (*Jour. Am. Med. Assn.*, 1917, lxviii, 817) gives a summary of cases of poliomyelitis treated with immune and normal human serum. It is interesting to see that of 51 preparalytic cases treated with immune serum, 44 remained free from paralysis, while of the 10 who developed some form of paralysis, 5 made a complete final recovery. The results with normal serum seem to be very favorable, but the number of cases treated in the preparalytic stage of the disease is too small, and a larger series of cases should first be treated before final deductions are made. The author says it is difficult to state how many of the patients treated with serum would have remained free from paralysis without serum treatment. It seemed, however, that the action of serum in poliomyelitis is beneficial; that the use of serum from recent immune donors is preferable to normal serum, but that human serum is indicated in the treatment of the acute stages, especially in the preparalytic period of the disease. When carefully observed and controlled, the treatment is harmless. A distinct reaction follows in some of the cases after the first dose; the reaction is less marked after the second, and little, if any, is noted after the third injection of serum. Two groups of cases seemed to give an unfavorable prognosis even in the earlier stages of the disease. One was the fulminating bulbar type with a rapidly progressive involvement of the respiratory center. The second type was a rapidly developing spinal paralytic form. In the latter cases, which were treated after the paralysis had already made a distinct headway and was beginning to involve the muscles of respiration, the serum showed possibly in a certain proportion of cases an inhibitory effect on further progress, which resulted in a saving of life. It is difficult to forecast, however, what the natural result of the disease would have been in these cases. Control patients without serum, in whom the muscles of respiration were involved at the time the patients came under observation, have also recovered. It seemed, however, that a larger number of serum-treated patients of the same degree of severity had remained alive than would have without the use of serum. No very definite judgment of the value of serum can be based on the results obtained in these cases. Yet, as a possible life-saving procedure, the author would continue to use the serum even in these cases and in the course of time obtain more definite